

UNITED STATES BANKRUPTCY COURT  
FOR THE WESTERN DISTRICT OF TENNESSEE  
Western DIVISION

CASE NAME: CAH Acquisition Company #11CASE NO: 19-22020-PJDMonthly Operating Report for the Month Ending (month/day/year) January 31, 2020For the period beginning (month,day) January 1 and ending (month,day) January 31NAICS Industry Classification Code: 622110

**THIS REPORT IS TO BE FILED 15 DAYS AFTER THE END OF THE MONTH** -- The Debtor must attach each of the following reports/documents unless the U.S. Trustee has waived the requirement in writing.

Report Attached	Previously Waived	REQUIRED REPORTS/DOCUMENTS
Mark One Box for Each Required Document:		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	1. Bank Account Balance Statement (Form 2-AB)
<input type="checkbox"/>	<input type="checkbox"/>	2. Comparative Balance Sheet - Assets (Form 2-BA)
<input type="checkbox"/>	<input type="checkbox"/>	3. Comparative Balance Sheet - Liabilities (Form 2-BL)
<input type="checkbox"/>	<input type="checkbox"/>	4. Supporting Schedule I (Post-Petition Payables)(Form 2-BP)
<input type="checkbox"/>	<input type="checkbox"/>	5. Supporting Schedules II (A/R, Payments to Prof. and Principals)(Form 2-BR)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6. Profit and Loss / Income Statement (Forms 2-E1 and 2-E2)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	7. Cash Flow Statement (Form 2-F)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	8. Cash Flow Summary (Form 2-FS)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	9. Detailed Listing of Receipts Statement (Form 2-G)
<input type="checkbox"/>	<input type="checkbox"/>	10. Detailed Listing of Disbursements Statement (Form 2-H)
<input type="checkbox"/>	<input type="checkbox"/>	11. Supporting Schedules III (Property Transfers, Insurance Coverage & Quarterly Fee Summary)(Form 2-I)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	12. Narrative Questionnaire Statement (Form 2-J)

**Documents Provided by Mail or E-Mail**

<input checked="" type="checkbox"/>	<input type="checkbox"/>	13. Bank Statements for All Bank Accounts (to be provided by mail to USTP when required)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	14. Bank Statement Reconciliations for all Bank Accounts (to be provided by mail to USTP when required)

*I declare under penalty of perjury that the following Monthly Operating Report, and any attachments hereto are true, accurate and correct to the best of my knowledge and belief. I further certify that the Monthly Operating Report has been filed with the Court.*

DEBTOR IN POSSESSION

Executed on: 3/18/20  
DateBy: /s/ Marianna Williams (Signature)Its: Court Appointed Debtor-In-Possession (Title)Phone # : 731.221.2200Printed Name: Marianna Williams

Form 2-A

Address: 326 Asbury Ave  
Ripley, TN 38063

Rev. 8/2/16

## **ADDENDUM TO ALL MONTHLY OPERATING REPORTS**

CAH Acquisition Company 11, LLC (the "Debtor") is contemporaneously filing this Global Note (as defined below) as a supplement to and integral part of all its Monthly Operating Reports filed in the Bankruptcy Court for the Western District of Tennessee (the "Bankruptcy Court").

This Global Note, Reservation of Rights, and Statement of Limitations, Methodology and Disclaimer Regarding Debtor's Monthly Operating Reports (the "Global Notes") pertain to, are incorporated by reference into, and comprise an integral part of all Monthly Operating Reports, and should be reviewed in connection with any review of all Monthly Operating Reports.

All Monthly Operating Reports filed in this Bankruptcy Case are prepared and created by Cohesive Healthcare Management and Consulting as Manager for Debtor under a Management and Hospital Services Agreement (dated March 27, 2019). The Management Fees listed in the Profit and Loss Statement contained in Form 2-E2 (Part IV. General Expenses) are that amount asserted by Cohesive Healthcare Management and Consulting. Debtor does not acquiesce to the asserted amount in the Monthly Operating Reports by filing said report(s).

DEBTOR: CAH Acquisition Company #11 CASE NO: 19-22020-PJD

Form 2-AB  
 BANK ACCOUNT BALANCE STATEMENT

For Period Ending: January 31, 2020

Bank Accounts

Account Name:	<u>CASH ON HAND</u>	<u>Personal/ Operating</u>	<u>Tax</u>	<u>Payroll</u>	<u>                    </u>	*
Bank Name:		First Citizens	N/A	N/A	US Bank	
Account # (last 4 digits):		3414	N/A	N/A	N/A	
						<u>Grand Total ALL Accounts</u>
Beginning Balance:	0.00	1,207,576.7	0.00	0.00	275.62	= 1,207,852.41
Plus: Total Receipts (Attach Detailed List, Form 2-G)	0.00	1,579,442.0	0.00	0.00	4,081.00	= 1,579,717.66
Less: Total Disbursements (Attach Detailed List, Form 2-H)	0.00	1,668,664.9	0.00	0.00	0.00	= 1,668,664.96
Transfers Between Bank Accounts:						
Transfers In		4,356.62				
(Transfers Out)	( )	( )	( )	( )	4,356.62	( )
Ending Balances:		1,122,710.4			0.00	= 1,122,710.49

\*If the Debtor maintains more than four (4) accounts, attach additional Form 2-AB and identify the nature of the additional account(s) (Cash Collateral, Savings, etc.)

Notes:

**Form 2-BA**  
**COMPARATIVE BALANCE SHEET STATEMENT**  
For Period Ending: January 31, 2020

	Current Month	Petition Date (1)
<b>ASSETS</b>		
<b>1. Current Assets:</b>		
Cash (from Form 2-AB, Grand Total All Accounts)	\$ 1,122,710.49	\$ 1,067,328.50
Total Accounts Receivable (from Form 2-BR)	21,963,962.33	0.00
Less allowance for doubtful accounts (from Form 2-BR)	( 15,683,845.11 )	( 0.00 )
Receivable from Officers, Employees, Affiliates	0.00	0.00
Inventory	0.00	0.00
Other Current Assets :(List)	0.00	0.00
	0.00	0.00
Negotiable Instruments	0.00	0.00
<b>2. Current Assets Sub-Total</b>	\$ 7,402,827.74	\$ 1,067,328.50
<b>3. Fixed Assets:</b>		
Land	\$ 800,000.00	\$ 0.00
Building	4,204,975.93	0.00
Equipment, Furniture and Fixtures	940,674.48	0.00
Vehicles	0.00	0.00
<b>4. Fixed Assets Sub-Total</b>	5,945,650.41	0.00
Less: Accumulated Depreciation	( 889,691.25 )	( 0.00 )
<b>5. Net Fixed Assets</b>	\$ 5,055,959.16	\$ 0.00
<b>6. Current Assets Sub-Total (from above 2. Current Assets Sub-Total)</b>	12,458,786.99	1,067,328.50
	0.00	0.00
<b>7. Other Assets (List):</b>	0.00	0.00
	0.00	0.00
<b>8. TOTAL ASSETS</b>	\$ 12,458,786.99	\$ 1,067,328.50

*(1) Petition date values are taken from the Debtor's balance sheet as of the petition date or are the values listed on the Debtor's schedules.*

CASE NAME:

CAH Acquisition Company #11

CASE NO:

## Form 2-BL

## COMPARATIVE BALANCE SHEET STATEMENT

For Period Ending: January 31, 2020

	Current	Petition
<b>LIABILITIES</b>		
Post Petition Liabilities		
Post-petition Accounts Payable (from Form 2-BP)	\$ 5,182,438.26	\$ 0.00
Post-petition Accrued Professional Fees (from Form 2-BR)	0.00	0.00
Post-petition Taxes Payable	0.00	0.00
Post-petition Notes Payable	1,067,650.00	0.00
Other Post-petition Payable(List):		
Accrued Interest	176,455.78	40,444.26
Accrued Liabilities	1,719,716.84	0.00
<b>Post Petition Liabilities Sub-Total</b>	<b>\$ 8,146,260.97</b>	<b>\$ 40,444.26</b>
Pre Petition Liabilities:		
Secured Debt (Schedule D, including amendments)	2,357,557.60	2,357,557.60
Priority Debt (Schedule E, including amendments)	0.00	0.00
Unsecured Debt (Schedule F, including amendments)	2,169,099.35	2,546,154.50
<b>Pre Petition Liabilities Sub-Total</b>	<b>\$ 4,526,657.04</b>	<b>\$ 0.00</b>
<b>TOTAL LIABILITIES (Sum of Pre Petition and Post Petition Liabilities)</b>	<b>\$ 12,672,918.00</b>	<b>\$ 4,944,156.50</b>
<b>SHAREHOLDERS/OWNERS' EQUITY</b>		
Owner's/Stockholder's Equity (Preferred Stock)	\$ 0.00	\$ 0.00
Owner's/Stockholder's Equity Common Stock)	0.00	0.00
Paid In Capital	0.00	0.00
Retained Earnings - Prepetition	1,172,562.87	-3,876,828.00
Retained Earnings - Post-petition	-1,386,693.90	0.00
<b>TOTAL OWNERS' EQUITY</b>	<b>\$ -214,131.11</b>	<b>\$ -3,876,828.00</b>
<b>TOTAL LIABILITIES AND OWNERS' EQUITY</b>	<b>\$ 12,458,786.89</b>	<b>\$ 1,067,328.50</b>

(1) Petition date values are taken from the Debtor's balance sheet as of the petition date or are the values listed on the Debtor's schedules.

Form 2-BL

Rev. 8/2/16

DEBTOR: CAH Acquisition Company #11

CASE NO: 19-22020 PJD

Form 2-BP  
SUPPORTING SCHEDULES II  
POST PETITION LIABILITIES AND PAYABLES STATEMENTS  
For Period Ending: January 31, 2020

Type	Beginning Balance (1)	Amount Accrued	Date Due	0-30 Days	31-60 Days	Ending Balance
<b>Income Tax Withheld:</b>						
Federal	0.00	0.00				0.00
State						
<b>FICA Tax Withheld</b>						
Employee's FICA Tax	0.00	0.00				0.00
Employer's FICA Tax	0.00	0.00				0.00
<b>Unemployment Tax</b>						
Federal	955.37	-955.37				
State	2,052.22	-2,052.22				
<b>Sales, Use &amp; Excise Taxes</b>						
<b>Property Taxes</b>						
Real Estate						
Personal Property						
<b>Accrued Income Tax:</b>						
Federal						
State						
Other: _____						
<b>TOTAL TAXES</b> \$	<u>3,007.59</u>	<u>\$ -3,007.59</u>	\$	\$	\$	\$
<b>POST-PETITION DEBTS</b>						
Secured	2,357,551					
Priority	1,067,650 <sup>+</sup>					1,067,650 <sup>+</sup>
Unsecured	2,197,951	-28,860 <sup>+</sup>		-28,860 <sup>+</sup>	-28,615.6	2,169,099 <sup>+</sup>
Accrued Interest Payable						
<b>TRADE ACCOUNTS &amp; OTHER PAYABLES</b>	<u>4,836,311</u>	<u>346,123</u>		<u>777,894</u>	<u>711,954</u>	<u>5,182,438.2</u>

(list separately on additional sheets)

(1) For first report, Beginning Balance will be \$0;  
thereafter, Beginning Balance will be Ending Balance from prior report.

DEBTOR: CAH Acquisition Company #11 CASE NO: 19-22020 PJD

Form 2-BR  
SUPPORTING SCHEDULES II  
For Period Ending: January 31, 2020

**ACCOUNTS RECEIVABLE AND POST PETITION PAYABLE AGING**

<u>Due</u>	<u>Accounts Receivable</u>	<u>Post Petition Accounts Payable</u>
Under 30 days	\$ 3,477,840.61	\$ 777,894.65
30 to 60 days	1,901,476.83	711,954.89
61 to 90 days	1,683,695.20	509,545.96
91 to 120 days	1,760,993.25	543,624.86
Over 120 days	13,139,956.49	2,639,417.90
<b>Total Post Petition</b>	<u>21,963,962.38</u>	<u>5,182,438.26</u>
<b>Pre Petition Amounts</b>	<u>0.00</u>	
Total Accounts Receivable (to Form 2-BA)	\$ 21,963,962.38	
Less: (Allowance for Doubtful Accounts) (to Form 2-BA)	( 15,683,845.13 )	
<b>Net Accounts Receivable</b>	<u>\$ 6,280,117.25</u>	

\* Attach a detail listing of accounts receivable and post-petition accounts payable

**SCHEDULE OF PAYMENTS TO ATTORNEYS AND OTHER PROFESSIONALS**

	<u>Month-end Retainer Balance</u>	<u>Current Month's Accrual</u>	<u>Paid in Current Month</u>	<u>Date of Court Approval</u>	<u>Month-end Balance Due *</u>
Debtor's Counsel	\$ _____	\$ _____	\$ _____	_____	\$ _____
Counsel for Unsecured Creditors' Committee	_____	_____	_____	_____	_____
Trustee's Counsel	_____	_____	_____	_____	_____
Accountant	_____	_____	_____	_____	_____
Other: _____	_____	_____	_____	_____	_____
<b>Total</b>	\$ _____	\$ _____	\$ _____		\$ _____

\*Balance due to include fees and expenses incurred but not yet paid.

**SCHEDULE OF PAYMENTS AND TRANSFERS TO PRINCIPALS/EXECUTIVES\*\***

<u>Payee Name</u>	<u>Position</u>	<u>Nature of Payment</u>	<u>Amount</u>
_____	_____	_____	\$ _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\*\*List payments and transfers of any kind and in any form made to or for the benefit of any proprietor, owner, partner, shareholder, officer or director. Including salaries, commissions, bonuses, etc.

DEBTOR: CAH Acquisition Company #11

CASE NO: 19-22020 PJD

Form 2-E1  
**PROFIT AND LOSS STATEMENT**  
 For Period Ending: January 31, 2020

	<u>Current Month</u>	<u>Accumulated Total (1)</u>
<b>I. GROSS OPERATING REVENUES</b>		
INCOME (LIST ALL SOURCES)		
Patient Service Revenue	3,645,401.00	13,948,338.00
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>TOTAL GROSS INCOME</b>	_____	_____
Less: Discounts, Returns, and Allowances	( 3,947,510.20 )	( 9,484,802.50 )
<b>Net Operating Revenue</b>	<u>-302,109.24</u>	<u>4,463,535.40</u>
<b>II. COST OF GOODS SOLD</b>	( _____ )	( _____ )
	-302,109.24	4,463,535.40
<b>III. GROSS PROFIT</b>	<u>_____</u>	<u>_____</u>
(Net Operating Revenue LESS Cost of Goods Sold)		
<b>IV. GENERAL EXPENSES</b>		
Operating Expenses		
Compensation and Payroll	0.00	
Officer/Management Compensation	_____	_____
Payroll - Other Employees	718,707.64	2,268,335.70
Taxes	62,745.87	152,930.84
Taxes - Payroll	_____	_____
Taxes - Real Property	_____	_____
Taxes - Personal Property (Ad Valorem)	_____	_____
Taxes - Sales	_____	_____
Taxes - Other _____	_____	_____

(1) Accumulated Totals include all revenue and expenses since the petition date.



DEBTOR: CAH Acquisition Company #11

CASE NO: 19-22020 PJD

**Form 2-E2**  
**PROFIT AND LOSS STATEMENT (Cont'd)**  
**For Period Ending: January 31, 2020**

IV. GENERAL EXPENSES	<u>Current Month</u>	<u>Accumulated Total (1)</u>
General	0.00	0.00
License Fees	<u>75,042.77</u>	<u>81,147.15</u>
Insurance	<u>12,177.71</u>	<u>48,710.84</u>
Depreciation / Amortization	<u>0.00</u>	<u>0.00</u>
Rents and Leases (Real Estate)	<u>26,799.82</u>	<u>99,016.31</u>
Rents and Leases (Personal Property)	<u>0.00</u>	<u>11,253.00</u>
Maintenance and Repairs	<u>100,325.45</u>	<u>493,682.61</u>
Supplies	<u>1,477.58</u>	<u>5,612.13</u>
Telephone	<u>29,212.17</u>	<u>115,303.87</u>
Utilities	<u>0.00</u>	<u>0.00</u>
Travel and Entertainment Expenses	<u>0.00</u>	<u>0.00</u>
Vehicle Expenses	<u>0.00</u>	<u>0.00</u>
Legal	<u>0.00</u>	<u>0.00</u>
Other		
Other: <u>Bank Fees</u>	<u>1,728.39</u>	<u>6,199.54</u>
Other: <u>Purchased Services</u>	<u>171,813.30</u>	<u>662,799.51</u>
Other: <u>Contract Labor</u>	<u>160,993.54</u>	<u>551,838.20</u>
Other: <u>Management Fees</u>	<u>250,000.00</u>	<u>1,000,000.00</u>
Other: <u>Miscellaneous</u>	<u>0.00</u>	<u>12,354.89</u>
Other: <u>Restructure Fees</u>	<u>182,220.50</u>	<u>197,924.50</u>
Other: <u>Interest Expense</u>	<u>24,234.45</u>	<u>94,804.26</u>
V. TOTAL EXPENSES	<u>1,817,479.1</u>	<u>5,801,913.36</u>
VI. NET INCOME OR (LOSS)	<u>-2,119,588.1</u>	<u>-1,338,377.9</u>
(Gross Profit LESS Total Expenses)		

(1) Accumulated Totals include all revenue and expenses since the petition date.

CASE NAME: CAH Acquisition Company #11

CASE NO: 19-22020 PJD

**Form 2-F**  
**CASH FLOW STATEMENT**  
For Period Ending: January 31, 2020

<b>1. CASH FLOWS FROM OPERATING ACTIVITIES:</b>	<u>Accumulated</u>
	<u>-1,338,377.</u>
<b>Income (Loss) From Operations</b>	
Adjustments to reconcile net income (loss) from operations to net cash provided by (used in) operating activities	
Patient Receipts (Pre and Post Petition)	<u>4,873,897.6</u>
Allowance for contractual adjustments and bad debt	<u>643,785.04</u>
Change in accounts receivable	<u>-4,490,461.</u>
Change in Accounts Payable/Accrued Liabilities	<u>1,524,547.4</u>
Change in Payroll Tax accrual	<u>-61,072.02</u>
<b>NET CASH PROVIDED BY (USED IN) OPERATING BUSINESS</b>	<u><u>1,152,319.1</u></u>
<b>2. CASH FLOWS FROM INVESTING ACTIVITIES</b>	
Capital Additions	<u>0.00</u>
<b>NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES</b>	<u><u>0.00</u></u>
<b>3. CASH FLOWS FROM FINANCING ACTIVITIES</b>	
Loan Advances	<u>0.00</u>
Change in Medicare Loans	<u>-113,981.65</u>
Change in accrued interest	<u>50,123.03</u>
<b>NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES</b>	<u><u>-58,858.62</u></u>
<b>NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS</b>	<u><u>1,093,460.4</u></u>
<b>CASH AND CASH EQUIVALENTS, BEGINNING OF PERIOD</b>	<u><u>29,250.00</u></u>
<b>CASH AND CASH EQUIVALENTS, END OF PERIOD</b>	<u><u>1,122,710.4</u></u>

CASE NAME: CAH Acquisition Company #11

CASE NO: 19-22020 PJD

**Form 2-FS**  
**CASH FLOW SUMMARY**  
For Period Ending: January 31, 2020

**CASH FLOW SUMMARY**

	Current Month	Accumulated
<b>1. Beginning Cash Balance</b>	\$ <u>1,207,852.41</u> <sup>(2)</sup>	\$ <u>29,250.00</u> <sup>(1)</sup>
(From Form 2-B-AB (Grand Total Beginning Balance))		
<b>2. Receipts</b>		
Operations	<u>1,583,523.04</u>	<u>5,038,612.41</u>
Sale of Assets	<u>0.00</u>	<u>0.00</u>
Other	<u>0.00</u>	<u>200,000.00</u>
<b>Total Cash Receipts</b>	\$ <u><u>1,583,523.04</u></u>	\$ <u><u>5,238,612.41</u></u>
<b>3. Disbursements</b>		
Operations	<u>1,668,664.96</u>	<u>4,145,151.92</u>
Debt Service/Secured loan payment	<u>                    </u>	<u>                    </u>
Professional fees/U.S. Trustee fees	<u>                    </u>	<u>                    </u>
Other	<u>                    </u>	<u>                    </u>
<b>Total Cash Disbursements</b>	\$ <u><u>1,668,664.96</u></u>	\$ <u><u>4,145,151.92</u></u>
<b>4. Net Cash Flow (Total Cash Receipts less Total Cash Disbursements)</b>	<u>-85,141.92</u>	<u>1,093,460.49</u>
<b>5. Ending Cash Balance (must equal Cash on Form 2-BA)</b>	\$ <u><u>1,122,710.49</u></u> <sup>(2)</sup>	\$ <u><u>1,122,710.49</u></u> <sup>(2)</sup>
(must equal Grand Total All Accounts Ending Balance, Form 2-AB)		

- (1) Accumulated beginning cash balance is the cash available at the commencement of the case.  
(2) Current month beginning cash balance should equal the previous month's ending balance.

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DEBTOR: CAH Acquisition Company #11CASE NO: 19-22020-PJD

Form 2-I  
SUPPORTING SCHEDULES III  
PROPERTY TRANSFER, INSURANCE COVERAGE & QUARTERLY FEES STATEMENT  
For the Period Ending: January 31, 2020

**TRANSFER OF PROPERTY POST-PETITION**

Has any property of the Debtor been sold or otherwise transferred other than in the ordinary course of the Debtor's business?

X

NO

       YES, If yes, Complete the Following (Add Additional Sheets if Necessary)

DESCRIPTION OF PROPERTY	To Whom Transferred	Transfer Date	Gross Value	Net Monies Received
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----

**INSURANCE SCHEDULE**

	Carrier	Policy #	Expiration Date	Amount of Coverage	Premium Amounts	Date Coverage Paid Through
Workers' Comp	Insurance remains same as pre-petition	-----	-----	\$ -----	\$ -----	-----
General Liability	Insurance remains same as pre-petition	-----	-----	\$ -----	\$ -----	-----
Property (Fire, Theft)	Insurance remains same as pre-petition	-----	-----	\$ -----	\$ -----	-----
Casualty	Insurance remains same as pre-petition	-----	-----	\$ -----	\$ -----	-----
Vehicle	Insurance remains same as pre-petition	-----	-----	\$ -----	\$ -----	-----
Other (list):	Insurance remains same as pre-petition	-----	-----	\$ -----	\$ -----	-----
Home Owners:	Insurance remains same as pre-petition	-----	-----	\$ -----	\$ -----	-----

**QUARTERLY FEES SUMMARY\***

<u>Month</u>	<u>Total Disbursements**</u>	<u>Quarterly Fee Due</u>	<u>Check No.</u>	<u>Date Paid</u>
<b><u>PRESENT QUARTER</u></b>				
-----	\$ -----			
-----	\$ -----			
-----	\$ -----			
<b>TOTAL PRESENT QUARTER</b>	<b>\$ -----</b>	<b>\$ -----</b>		
<b><u>PREVIOUS QUARTER</u></b>				
October	\$ 895,551.93			
November	\$ 658,799.38			
December	\$ 947,859.61			
<b>TOTAL PREVIOUS QUARTER</b>	<b>\$ -----</b>	<b>\$ -----</b>		

\* This Summary is to reflect the current and immediately previous Quarterly Fee information cumulative to the end of the reporting period.

\*\* Should agree with Form 2-AB. Disbursements are net of transfers to other Debtor-In-Possession bank accounts.

Form 2-I

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DEBTOR: CAH Acquisition Company #11

CASE NO: 19-22020-PJD

Form 2-J

**NARRATIVE QUESTIONNAIRE STATEMENT**

For Period Ending January 31, 2020

- I. Has the Debtor-In-Possession made any payments on its pre-petition unsecured debt, except for that which has been so authorized by the Bankruptcy Court?

☒ No.

☐ Yes. Explain: \_\_\_\_\_

- II. Has the Debtor-In-Possession during this reporting period provided compensation or other remuneration to any Officers, Directors, Principals, or Other Insiders without appropriate authorization and disclosure?

☒ No.

☐ Yes. Explain: \_\_\_\_\_

- III. State what progress was made during this reporting period toward the filing of a Disclosure Statement and Plan of Reorganization or Liquidation.

Debtor-in-possession (DIP) has identified potential purchasers of business, DIP has created a due diligence portal for potential buyers.

DIP is now receiving CMS receivables. DIP expects the bidding dates will be revised within the next sixty (60) days.

- IV. Describe potential future developments which may have a significant impact on this bankruptcy case.

N/A

- V. Are all Post-Petition tax obligations currently paid or deposited?

☒ Yes.

☐ No. Explain.: \_\_\_\_\_

- VI. Are all United States Trustee Quarterly Fees current?

☒ Yes.

Last Quarter Paid: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_

☐ No. Explain.: \_\_\_\_\_

- VII. Did you receive any income during this reporting period, which is not set forth in the operating report?

☒ No.

☐ Yes. Please set forth the amount(s) and the source(s) of the income.



**FIRST CITIZENS  
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**CAH ACQUISITION COMPANY 11 LLC  
BY MARIANNA WILLIAMS RECEIVER  
PO BOX H  
DYERSBURG TN 38025**

**ACCOUNT ANALYSIS**

Account Number: [REDACTED]  
Statement Date: 1/31/20  
Branch: 001  
Checks/Items Enclosed: 17

Out with the Old, In with the New  
Have you moved or changed your phone number?  
Do you have a new email address?  
Update contact information through Online Banking  
or by visiting any of our financial centers.

**CHECKING**

**CAH ACQUISITION COMPANY 11 LLC**

**Acct 2773414**

Beginning Balance	1/01/20	1,224,776.00	
Deposits / Misc Credits	172	6,699,901.14	
Withdrawals / Misc Debits	30	7,924,577.14	
** Ending Balance	1/31/20	100.00	**
Service Charge		.00	
Average Balance		1,131,508	
Average Collected Balance		1,119,260	
Minimum Balance		100	
Enclosures		17	

**Miscellaneous Credits**

Date	Deposits	Withdrawals	Activity Description
1/02	907.32		AARP Supplementa/HCCCLAIMPMT TRN*1*1496707669*1362739571*000036273\
1/02	940.00		UMR/HCCCLAIMPMT TRN*1*496384243*1391995276*0000UMR01\
1/02	9,527.79		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2019122912200253*1363379945*000095 378\
1/02	21,067.13		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3454379*1571062326*000010311~
1/02	70,884.86		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3454298*1571062326*000010311~
1/03	4,892.89		HUMANA INS CO/EFFPAYMENT TRN*1*001290047980614*1391263473\
1/03	73,656.13		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSPEC
1/03	67.41		UnitedHealthcare/HCCCLAIMPMT TRN*1*1497133421*1411289245*000087726\
1/03	852.50		UMR/HCCCLAIMPMT TRN*1*496816853*1391995276*0000UMR01\
1/03	3,903.98		UNITEDHEALTHCARE/HCCCLAIMPMT TRN*1*1TR49478839*1411289245*000087726\
1/03	4,225.25		UMR/HCCCLAIMPMT TRN*1*496816852*1391995276*0000UMR01\



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 PROVIDED TO HELP YOU BALANCE  
 YOUR BANK STATEMENT

00003939-0019537-0001-0007-FILM18004070131204730(00003939)-000019539



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CAH ACQUISITION COMPANY 11 LLC

Account Number: [REDACTED]  
Statement Date: 1/31/20

Miscellaneous Credits

Date	Deposits	Withdrawals	Activity Description
1/03	5,534.73		AETNA AS01/HCCCLAIMPMT TRN*1*819364000174921*1066033492\
1/03	45,945.84		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3455010*1571062326*000010311~
1/06	112.56		UnitedHealthcare/HCCCLAIMPMT TRN*1*1497673675*1411289245*000087726\
1/06	161.20		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010314700192*1363379945*000095 378\
1/06	537.65		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010311600815*1363379945*000095 378\
1/06	705.80		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010112500146*1363379945*000095 378\
1/06	1,304.29		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010215600850*1363379945*000095 378\
1/06	5,404.70		UMR/HCCCLAIMPMT TRN*1*497077417*1391995276*0000UMR01\
1/06	7,965.11		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010117100613*1363379945*000095 378\
1/06	13,808.06		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3455737*1571062326*000010311~
1/06	19,893.23		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3455816*1571062326*000010311~
1/06	23,599.83		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010214700036*1363379945*000095 378\
1/07	49,611.02		DEPOSIT
1/07	182.91		UnitedHealthcare/HCCCLAIMPMT TRN*1*1498062608*1411289245*000087726\
1/07	210.41		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048037861*1391263473\
1/07	530.48		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048037862*1391263473\
1/07	985.92		AETNA AS01/HCCCLAIMPMT TRN*1*820002000060609*1066033492\
1/07	1,122.89		UNITED BEHAVIORA/HCCCLAIMPMT TRN*1*1498062131*1411289245*000087726\
1/07	3,447.32		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3456635*1571062326*000010311~
1/07	25,047.33		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3456470*1571062326*000010311~
1/07	70,007.73		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3456396*1571062326*000010311~



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CAH ACQUISITION COMPANY 11 LLC

Account Number:

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## Miscellaneous Credits

Date	Deposits	Withdrawals	Activity Description
1/08	20.00		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSPCB
1/08	39.25		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048055657*1391263473\
1/08	624.51		AETNA A04/HCCCLAIMPMT TRN*1*820003000020377*1066033492\
1/08	919.39		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010515800128*1363379945*000095 378\
1/08	3,117.16		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048055658*1391263473\
1/08	7,255.64		AETNA AS01/HCCCLAIMPMT TRN*1*820003000020389*1066033492\
1/08	11,164.64		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3456995*1571062326*000010311~
1/09	42.36		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010813100583*1363379945*000095 378\
1/09	108.61		AETNA AS01/HCCCLAIMPMT TRN*1*820006000166790*1066033492\
1/09	150.00		United HealthCar/HCCCLAIMPMT TRN*1*1SG06739830*1411289245*000087726\
1/09	164.26		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048071475*1391263473\
1/09	312.80		UNITEDHEALTHCARE/HCCCLAIMPMT TRN*1*1TR49980405*1411289245*000087726\
1/09	1,477.96		AARP Supplementa/HCCCLAIMPMT TRN*1*9498633425*1362739571*000036273\
1/09	1,905.44		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010810700423*1363379945*000095 378\
1/09	2,152.26		UMR/HCCCLAIMPMT TRN*1*498567154*1391995276*0000UMR01\
1/10	275.62		DEPOSIT
1/10	70.00		STATE-TN PAYMNTS/TN PAYMNTS
1/10	110.62		STATE-TN PAYMNTS/HCCCLAIMPMT TRN*1*104951730*K626001445\
1/10	164.26		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048082761*1391263473\
1/10	522.40		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010917200448*1363379945*000095 378\
1/10	1,162.32		UMR/HCCCLAIMPMT TRN*1*498826319*1391995276*0000UMR01\
1/10	1,778.41		AETNA H09/HCCCLAIMPMT TRN*1*160107200413220*1066033492\
1/10	2,293.32		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048082762*1391263473\



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Account Number: [REDACTED]  
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Miscellaneous Credits

Date	Deposits	Withdrawals	Activity Description
1/10	8,023.66		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020010916400213*1363379945*000095 378\
1/10	9,272.27		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3458017*1571062326*000010311~
1/10	39,348.02		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3457938*1571062326*000010311~
1/13	14,100.26		DEPOSIT
1/13	20.00		STATE-TN PAYMNTS/TN PAYMNTS
1/13	228.17		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSFBC
1/13	506.60		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSFBC
1/13	58.78		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048096060*1391263473\
1/13	782.24		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011012500260*1363379945*000095 378\
1/13	3,587.82		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011010800117*1363379945*000095 378\
1/13	18,190.85		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3458788*1571062326*000010311~
1/14	80,267.72		DEPOSIT
1/14	40.00		STATE-TN PAYMNTS/TN PAYMNTS
1/14	53.93		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011114400094*1363379945*000095 378\
1/14	111.71		CARITEN HP/HCCCLAIMPMT TRN*1*010560011599075*1621579044\
1/14	571.00		AARP Supplementa/HCCCLAIMPMT TRN*1*9499693036*1362739571*000036273\
1/14	2,537.49		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048118271*1391263473\
1/14	7,951.77		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3459519*1571062326*000010311~
1/14	45,864.16		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3459441*1571062326*000010311~
1/15	20.00		STATE-TN PAYMNTS/TN PAYMNTS
1/15	458.60		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSFBC
1/15	84.72		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011212200038*1363379945*000095 378\
1/15	93.27		AETNA AS01/HCCCLAIMPMT TRN*1*820010000266517*1066033492\



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CAH ACQUISITION COMPANY 11 LLC

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Miscellaneous Credits

Date	Deposits	Withdrawals	Activity Description
1/15	930.12		AETNA AS01/HCCCLAIMPMT TRN*1*820010000266523*1066033492\
1/15	1,538.13		AARP Supplementa/HCCCLAIMPMT TRN*1*9500017418*1362739571*000036273\
1/15	11,069.25		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3459908*1571062326*000010311~
1/15	16,280.79		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3459975*1571062326*000010311~
1/16	20.00		STATE-TN PAYMNTS/TN PAYMNTS
1/16	267.59		Erie Insurance E/HCCCLAIMPMT TRN*1*11500626758*1251232960*0000ERIE1\
1/16	632.13		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3460403*1571062326*000010311~
1/16	750.38		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048208706*1391263473\
1/16	900.40		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011511400328*1363379945*000095378\
1/16	957.97		UMR/HCCCLAIMPMT TRN*1*500289282*1391995276*0000UMR01\
1/16	3,370.92		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011516300037*1363379945*000095378\
1/16	3,753.99		UNITEDHEALTHCARE/HCCCLAIMPMT TRN*1*1TR50437323*1411289245*000087726\
1/16	4,141.86		AARP Supplementa/HCCCLAIMPMT TRN*1*9500605630*1362739571*000036273\
1/16	4,603.50		UMR/HCCCLAIMPMT TRN*1*500289283*1391995276*0000UMR01\
1/17	20.00		STATE-TN PAYMNTS/TN PAYMNTS
1/17	55.00		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSEPC
1/17	97.96		STATE-TN PAYMNTS/HCCCLAIMPMT TRN*1*104961818*K626001445\
1/17	758.87		UMR/HCCCLAIMPMT TRN*1*500689104*1391995276*0000UMR01\
1/17	2,344.44		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011613100010*1363379945*000095378\
1/17	4,266.17		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011615701005*1363379945*000095378\
1/17	4,932.51		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3460957*1571062326*000010311~
1/21	209.49		DEPOSIT
1/21	82,567.63		DEPOSIT



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Miscellaneous Credits

Date	Deposits	Withdrawals	Activity Description
1/21	109.76		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSFBC
1/21	375.20		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSFBC
1/21	630.01		UMR MARTEN TRANS/HCCCLAIMPMT TRN*1*501093598*1391995276*0000UMR01\
1/21	4,729.94		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011712200057*1363379945*000095 378\
1/21	7,731.64		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011715700205*1363379945*000095 378\
1/21	30,993.89		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3461754*1571062326*000010311~
1/21	49,988.16		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3461830*1571062326*000010311~
1/22	654.01		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSFBC
1/22	22.10		UnitedHealthcare/HCCCLAIMPMT TRN*1*1501521248*1411289245*000087726\
1/22	705.32		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011816900111*1363379945*000095 378\
1/22	1,810.00		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011813400245*1363379945*000095 378\
1/22	28,690.63		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3462660*1571062326*000010311~
1/22	44,276.98		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3462588*1571062326*000010311~
1/23	50.00		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSFBC
1/23	162.24		AETNA H09/HCCCLAIMPMT TRN*1*160120200270118*1066033492\
1/23	310.26		AETNA A501/HCCCLAIMPMT TRN*1*820017000159181*1066033492\
1/23	423.18		AARP Supplementa/HCCCLAIMPMT TRN*1*9501805144*1362739571*000036273\
1/23	1,502.28		HUMANA INS CO/HCCCLAIMPMT TRN*1*001290048315337*1391263473\
1/23	1,543.28		UNITEDHEALTHCARE/HCCCLAIMPMT TRN*1*1TR50910449*1411289245*000087726\
1/23	1,586.97		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020012215500518*1363379945*000095 378\



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CAH ACQUISITION COMPANY 11 LLC

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Miscellaneous Credits

Date	Deposits	Withdrawals	Activity Description
1/23	1,812.75		UHC Insurance Co/HCCCLAIMPMT TRN*1*1TR50831651*1201902768*000087726\
1/23	4,327.20		UMR/HCCCLAIMPMT TRN*1*501659398*1391995276*0000UMR01\
1/23	7,364.87		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020012210500183*1363379945*000095 378\
1/23	8,750.19		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020011912600193*1363379945*000095 378\
1/23	24,893.43		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3463352*1571062326*000010311~
1/23	76,356.78		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3463610*1571062326*000010311~
1/24	1,364.00		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSPC
1/24	56.48		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020012310600078*1363379945*000095 378\
1/24	2,569.55		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020012315200723*1363379945*000095 378\
1/24	3,827.25		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3464181*1571062326*000010311~
1/27	3,319.60		DEPOSIT
1/27	114,755.83		DEPOSIT
1/27	40.00		STATE-TN PAYMNTS/TN PAYMNTS
1/27	325.97		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSPC
1/27	500.00		Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSPC
1/27	50.00		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020012415801085*1363379945*000095 378\
1/27	164.26		UnitedHealthcare/HCCCLAIMPMT TRN*1*1502832515*1411289245*000087726\
1/27	191.17		UnitedHealthcare/HCCCLAIMPMT TRN*1*1502831487*1411289245*000087726\
1/27	618.52		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020012413200481*1363379945*000095 378\
1/27	5,939.40		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3465004*1571062326*000010311~
1/27	31,871.02		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3464928*1571062326*000010311~







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Account Number: [REDACTED]  
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Miscellaneous Credits

Date	Deposits	Withdrawals	Activity Description
1/30	22,782.79		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3466714*1571062326*000010311~
1/31	1,763,416.77		DAILY SWEEP DD XXXXXX1402 Includes Interest of 26.50
1/31	88.34		STATE-TN PAYMNTS/HCCCLAIMPMT TRN*1*104982757*K626001445\
1/31	518.04		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020013014900294*1363379945*000095 378\
1/31	7,317.97		UMR/HCCCLAIMPMT TRN*1*504093760*1391995276*0000UMR01\
1/31	8,090.20		UHC PLAN OF THE/HCCCLAIMPMT TRN*1*2020013015600071*1363379945*000095 378\
1/31	15,496.95		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3467101*1571062326*000010311~
1/31	26,188.30		A/B MAC PT A TN/HCCCLAIMPMT TRN*1*EFT3467179*1571062326*000010311~

Miscellaneous Debits

Date	Deposits	Withdrawals	Activity Description
1/06		73.89	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/09		1.43	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/13		8.27	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/13		17.88	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/16		4.99	FIRSTCNB/CM FEES
1/16		16.40	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/21		3.17	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/21		5.71	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/21		15.24	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP


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## Miscellaneous Debits

Date	Deposits	Withdrawals	Activity Description
1/23		26.71	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/24		1.50	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/27		6.86	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/27		13.35	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/27		52.91	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/28		1,647,330.31	Trnsfr to CHECKING Acct Ending in 1402
1/29		1,705,580.64	Trnsfr to CHECKING Acct Ending in 1402
1/30		2.78	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/30		1,763,390.27	Trnsfr to CHECKING Acct Ending in 1402
1/31		25,951.93	BENE:TRUSS LLC TRN:P202001310037824
1/31		26.67	Worldpay/MTHCHGS MERCH BANKCARD 542929804668275 LAUDERDAL E COMMUNITY HOSP
1/31		30.00	Worldpay/NET SETLMT Worldpay NET SETLMT 54292980466 8275 LAUDERDALE COMMUNITY HOSFBC
1/31		1,176,178.68	Trnsfr to CHECKING Acct Ending in 1402

## Paid Checks

\* indicates skip in check numbers

Date	Check No.	Amount	Date	Check No.	Amount	Date	Check No.	Amount
1/03	1410	379,929.54	1/22	1414	1,477.58	1/31	1422*	182,220.50
1/10	1411	132,936.88	1/24	1415	90,648.89	1/31	1423	436,708.79
1/17	1413*	380,318.54	1/29	1417*	1,596.83			

## Daily Balance Summary

Date	Balance	Date	Balance	Date	Balance
1/02	1,328,103.10	1/08	1,334,957.43	1/14	1,446,200.06
1/03	1,087,252.29	1/09	1,341,269.69	1/15	1,476,674.94
1/06	1,160,670.83	1/10	1,271,353.71	1/16	1,496,052.29
1/07	1,311,816.84	1/13	1,308,802.28	1/17	1,128,208.70



**FIRST CITIZENS**  
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Return Service Requested

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CAH ACQUISITION COMPANY 11 LLC

Account Number:  
Statement Date:

1/31/20

Daily Balance Summary

Date	Balance	Date	Balance	Date	Balance
1/21	1,305,520.30	1/24	1,426,425.37	1/29	100.00
1/22	1,380,201.76	1/27	1,584,128.02	1/30	100.00
1/23	1,509,258.48	1/28	100.00	1/31	100.00

First Citizens National Bank

Account  
Statement Date  
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FIRST CITIZENS NATIONAL BANK CHECKING DEPOSIT  
DATE: Jan 7, 2020  
NAME: David Comm Hosp.  
AMOUNT: \$ 49,611.02  
NET DEPOSIT: \$ 49,611.02

01/07/2020 Serial# Amount \$49,611.02

CAH ACQUISITION 11 LLC BY MARIANNA WILLIAMS RECEIVER  
DATE: 1/10/2020  
AMOUNT: \$ 275.62  
NET DEPOSIT: \$ 275.62

01/10/2020 Serial# Amount \$275.62

FIRST CITIZENS NATIONAL BANK DEPOSIT TICKET  
DEPOSIT TO THE ACCOUNT OF: CAH Acquisition Company  
DATE: 1/13/2020  
AMOUNT: \$ 14,100.26  
NET DEPOSIT: \$ 14,100.26

01/13/2020 Serial# Amount \$14,100.26

FIRST CITIZENS NATIONAL BANK CHECKING DEPOSIT  
DATE: Jan 14, 2020  
NAME: David Comm Hosp.  
AMOUNT: \$ 80,267.72  
NET DEPOSIT: \$ 80,267.72

01/14/2020 Serial# Amount \$80,267.72

FIRST CITIZENS NATIONAL BANK DEPOSIT TICKET  
DEPOSIT TO THE ACCOUNT OF: CAH Acquisition  
DATE: 1/21/2020  
AMOUNT: \$ 209.49  
NET DEPOSIT: \$ 209.49

01/21/2020 Serial# Amount \$209.49

FIRST CITIZENS NATIONAL BANK CHECKING DEPOSIT  
DATE: Jan 21, 2020  
NAME: David Comm Hosp.  
AMOUNT: \$ 82,567.63  
NET DEPOSIT: \$ 82,567.63

01/21/2020 Serial# Amount \$82,567.63

CHECKING DEPOSIT  
DATE: 01/27/2020  
NAME: David Comm Hosp.  
AMOUNT: \$ 3,319.60  
NET DEPOSIT: \$ 3,319.60

01/27/2020 Serial# Amount \$3,319.60

FIRST CITIZENS NATIONAL BANK CHECKING DEPOSIT  
DATE: Jan 27, 2020  
NAME: David Comm Hosp.  
AMOUNT: \$ 114,755.83  
NET DEPOSIT: \$ 114,755.83

01/27/2020 Serial# Amount \$114,755.83

CHECKING DEPOSIT  
DATE: 01/28/2020  
NAME: David Comm Hosp.  
AMOUNT: \$ 12,906.95  
NET DEPOSIT: \$ 12,906.95

01/28/2020 Serial# Amount \$12,906.95

CAH ACQUISITION 11 LLC BY MARIANNA WILLIAMS RECEIVER  
DATE: 1/28/2020  
AMOUNT: \$ 379,929.54  
NET DEPOSIT: \$ 379,929.54

01/03/2020 Serial# 1410 Amount \$379,929.54

CAH ACQUISITION 11 LLC BY MARIANNA WILLIAMS RECEIVER  
DATE: 1/9/2020  
AMOUNT: \$ 132,936.88  
NET DEPOSIT: \$ 132,936.88

01/10/2020 Serial# 1411 Amount \$132,936.88

CAH ACQUISITION 11 LLC BY MARIANNA WILLIAMS RECEIVER  
DATE: 1/17/2020  
AMOUNT: \$ 380,318.54  
NET DEPOSIT: \$ 380,318.54

01/17/2020 Serial# 1413 Amount \$380,318.54

First Citizens National Bank

Account  
Statement Date  
Page

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CAH ACQUISITION 11 LLC  
BY MARIANNA WILLIAMS RECEIVER  
PO BOX 11  
DYERSBURG, TN 38025  
DATE 1/17/20  
FAY TO THE ORDER OF Aerona \$747.58  
Fourteen hundred seventy seven and 58/100  
FIRST CITIZENS NATIONAL BANK  
Dyersburg, TN 38025  
MEMO Marian Williams  
⑆084301042⑆ 1414

01/22/2020 Serial# 1414 Amount \$1,477.58

CAH ACQUISITION 11 LLC  
BY MARIANNA WILLIAMS RECEIVER  
PO BOX 11  
DYERSBURG, TN 38025  
DATE 1/23/2020  
FAY TO THE ORDER OF Cohesive Healthcare \$90,648.89  
Ninety thousand six hundred forty eight and 89/100  
FIRST CITIZENS NATIONAL BANK  
Dyersburg, TN 38025  
MEMO Marian Williams  
⑆084301042⑆ 1415

01/24/2020 Serial# 1415 Amount \$90,648.89

CAH ACQUISITION 11 LLC  
BY MARIANNA WILLIAMS RECEIVER  
PO BOX 11  
DYERSBURG, TN 38025  
DATE 1/28/2020  
FAY TO THE ORDER OF Tencom \$1,596.83  
Fifteen hundred ninety six and 83/100  
FIRST CITIZENS NATIONAL BANK  
Dyersburg, TN 38025  
MEMO Computers Marian Williams  
⑆084301042⑆ 1417

01/29/2020 Serial# 1417 Amount \$1,596.83

CAH ACQUISITION 11 LLC  
BY MARIANNA WILLIAMS RECEIVER  
PO BOX 11  
DYERSBURG, TN 38025  
DATE 1/29/2020  
FAY TO THE ORDER OF Baker Done Son \$182,220.50  
One hundred eighty two thousand two hundred twenty and 50/100  
FIRST CITIZENS NATIONAL BANK  
Dyersburg, TN 38025  
MEMO attys fees & expenses Marian Williams  
⑆084301042⑆ 1422

01/31/2020 Serial# 1422 Amount \$182,220.50

TELLER NO. 2000  
CAH ACQUISITION 11 LLC  
BY MARIANNA WILLIAMS RECEIVER  
PO BOX 11  
DYERSBURG, TN 38025  
DATE 1/31/2020  
FAY TO THE ORDER OF Cohesive Healthcare \$436,708.79  
Four hundred thirty six thousand seven hundred eight and 79/100  
FIRST CITIZENS NATIONAL BANK  
Dyersburg, TN 38025  
MEMO Marian Williams  
⑆084301042⑆ 1423

01/31/2020 Serial# 1423 Amount \$436,708.79